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PTO/SB/01 (10-00) Approved for use through 10/31/2002 OMB 0651-0032

			Attorney Docket Numl	ber WLI 1012 PUS
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		First Named Inventor	Morrow, et al	
		COMPLETE IF KNOWN		
		Application Number		
Declaration Submitted with Initial Filing	bmitted OR Submitted after Initial Filing (surcharge	Filing Date		
		Group Art Unit		
		Examiner Name		

_										
As a below named inventor, I hereby declare that:										
	My residence, mailing address, and citizenship are as stated below next to my name.									
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is daimed and for which a patent is sought on the invention entitled:									
	LACROSSE GOALIE STICK HEAD									
	(Title of the Invention)									
	the specification of which									
	☐ is attached hereto OR as United States Application Number or PCT International									
	was filed on (MM/DD/YYYY)			as United	States Application	Number of PC	o international			
	(if applicable).									
	Application Number		and was a	mended on (MM/DD/Y	YYY) L					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
	l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the confunction-in-part application.									
I hereby claim foreign priority benefits under 25 U.S.C. 119(9)+(q) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(b) of any for-T international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed.										
	Prior Foreign Application Number(s)	(Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified (YES	Copy Attached? NO			
					0000	0000	0000			
	☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
	I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
_	Application Number(s)			te (MM/DD/YYYY)						
60			April 18, 2		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					

[Page 1 of 3]

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Artz & Artz, P.C. Address							
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Country	Te	elephone	248-23	23-950	0	248-223-9522 Fax	
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NAME OF SOLE OR FIRST INV	ENTOR:	T		A petit	tion has been fil	ed for this unsigned inventor	
Ven Name David Family Name Morrow Or Surname Or Surname							
nventor's Signature						Date	
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ity Farmington Hills	State Mi			zip ⁴	8334	Country U.S.	
IAME OF SECOND INVENTOR	:			A petil	tion has been fil	led for this unsigned inventor	
Siven Name Jessie first and middle [if any])				Family Name Hubbard or Surname			
ventor's ignature Date							
tesidence: City Troy			State MI		U.S. Country	U.S.	
failing Address 2718 Sommerset Blvd., #201							
Nailing Address							
Troy	State MI			ZIP 48	3084	Country U.S.	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

		_						
Name of Additional Joint Inventor, if an	y:		A petition has been filed	i for th	is unsigned inventor			
Given Name (first and middle [if any])			Family Name	e or Si	urname			
. Salvatore	LoCascio							
'Inventor's Signature				Date				
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Mailing Address								
City Bayport	NY State		11705 ZIP C	ountr	, U.S.			
Name of Additional Joint Inventor, if an	y:		A petition has been filed	for this	s unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature			Date					
Residence: City State			Country		Citizenship			
Mailing Address								
Mailing Address								
City State			ZIP	Country				
Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature				Date				
Residence: City	State		Country		Citizenship			
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